Fill in this information to identify your case:		
United States Bankruptcy Court for the:  Western District of Michigan	<u>8.28 ( ) </u> (	
Case number (If known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

#### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your	Colleen	*
	government-issued picture	First name	First name
	identification (for example, your driver's license or passport).	E	
	and the second of the second o	Middle name	Middle name
	Bring your picture identification	Singleton	
	to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have		
	used in the last 8 years	First name	First name
	Include your married or maiden		
	names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
2	Only the lest 4 digits of		
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>1</u> <u>1</u> <u>1</u> <u>8</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

Deb	tor 1 <u>Colleen</u> First Name	E Singleton Middle Name Last Name	Case number (if known)
	The second section is a second second section of the second section se	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used	☑ I have not used any business names or EINs.	I have not used any business names or EINs.
	in the last 8 years Include trade names and doing	Business name	Business name
	business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live	१८ सार्वनम् १८ २ ४ वर्षे १८ - १८ स्थापण न्यान्यः । सम्बेनम् वर्षे स्वयं प्रमाधाः प्रत्येवस्य स्वयं स्वयं स्वयं	If Debtor 2 lives at a different address:
		4522 Airline Drive Number Street	Number Street
		Muskegon, MI 49444	
		City State ZIP Co	Code City State ZIP Code
		Muskegon County	County
		If your mailing address is different from the one fill it in here. Note that the court will send any not you at this mailing address.	
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Co	Code City State ZIP Code
6.		Check one:	Check one:
	district to file for bankruptcy	Over the last 180 days before filing this petiti have lived in this district longer than in any or district.	
		I have another reason. Explain. (See 28 U.S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)

Deb	Debtor 1 <u>Colleen</u>		E		Singleton	Case number (if known)				
		First Name	Middle Na	ıme	Last Name					
Par	t 2: Tell ti	First Name								
7.			Bankrup Cr Cr Cr	tcy (Form napter 7 napter 11 napter 12						
8.	How you w	ill pay the fee	deta chec a cro  I nec to P  I rec judg offic choc	ills about ck, or mo edit card ed to pay ay The F quest tha e may, be ial povert ose this c	how you may pay. Typically, if yoney order. If your attorney is subor check with a pre-printed address the fee in installments. If you cilling Fee in Installments (Official to my fee be waived (You may reut is not required to, waive your ty line that applies to your family option, you must fill out the Applie.	ou are paying the fee yourse mitting your payment on you ess.  choose this option, sign and a Form 103A).  quest this option only if you a fee, and may do so only if yo size and you are unable to p	If, you may pay with cash, cashier's r behalf, your attorney may pay with ttach the Application for Individuals re filing for Chapter 7. By law, a ur income is less than 150% of the ay the fee in installments). If you			
9.				District_		MM / DD / YYYY When 07/13/2021 MM / DD / YYYY When	Case number 21-01717			
10.	pending or spouse wh case with y	being filed by a o is not filing this ou, or by a		District _		When MM / DD / YYYY	Case number, if known			
11.	Do you ren		☑ No.	Go to I Has yo No	ine 12. ur landlord obtained an eviction . Go to line 12. s. Fill out <i>Initial Statement About</i>	judgment against you?				

Deb	tor 1	Colleen	E	_	Singleton		Case number (if known)	_		
		First Name	Midd	le Name	Last Name		·			
D	4 2 Danes	4 Abaut Anu Buain	0000	o You O	own as a Sole Proprieto					
Par	Керо	t About Any Busin	USSU	s rou c	wii as a sole Proprieto			_		
12.		sole proprietor of	Ą	No. Go to	Part 4.					
	any full- or business?			Yes. Nam	ne and location of business					
	business yo	rietorship is a ou operate as an and is not a separate		Name of b	ousiness, if any					
		, partnership, or LLC.		Number	Street					
	proprietors	more than one sole nip, use a separate attach it to this								
	petition.	mach it to this		City		State	ZIP Code			
				Check th	e appropriate box to describ	e your business:				
				☐ Heal	))					
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))						
				_ `	kbroker (as defined in 11 U.S	"				
				_						
				_	modity Broker (as defined in e of the above					
				- None	e of the above					
13.	11 of the E	ing under Chapter Bankruptcy Code ou a <i>small busin</i> ess	app she	<i>ropriate d</i> et, statem	deadlines. If you indicate that	you are a small busines statement, and federal i	ou are a small business debtor so that it can set is debtor, you must attach your most recent balance income tax return or if any of these documents do no	)t		
		ition of small business	Ą	No.	I am not filing under Chapter	· <b>11</b> .				
	debtor, see 101(51D).	debtor, see 11 U.S.C. § 101(51D).			I am filing under Chapter 11, Bankruptcy Code.	usiness debtor according to the definition in the				
							ebtor according to the definition in the der Subchapter V of Chapter 11.			
					I am filing under Chapter 11, Bankruptcy Code, and I cho		ebtor according to the definition in the bchapter V of Chapter 11.			
		**************************************			- Marine Control of the Control of t		The state of the s			

Debtor 1	Colleen	<u>E</u>	Singleton			Case number (if known)		
	First Name	Middle Name	Last Name					
Part 4: Re	oort if You Own or Ha	nve Any Hazard	ous Property o	Any Prope	erty That Needs	Immediate Attentio	n	
-	own or have any	₩ No.				-		
alleged	roperty that poses or is lleged to pose a threat of nminent and identifiable	Yes. What	is the hazard?		<del></del>			_
hazard t	o public health or							<del>-</del>
property	safety? Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock	If imm	ediate attention is	needed, why	is it needed?			
						= :	<del></del>	_
that mus	t be fed, or a building ds urgent repairs?							_
		Where	e is the property?					_
				Number	Street			
								_
				City		State	ZIP Code	

15. The same of th	Tell the court whether you nave received a briefing about credit counseling.	to Rec	ddle Name	Last Name g About Credit Counseling				er (if known)	
15. The same of th	Tell the court whether you nave received a briefing about credit counseling.			g About Credit Counseling					
h a T r c b	nave received a briefing about credit counseling.	Abo	out Dobtos 4:						
n o b	The law requires that you		out Deptor 1.		Abo	ut Deb	otor 2 (Spous	e Only in a Joint Case):	
b 0	The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.		ı must check one:		You	must o	check one:		
C			agency within the	ing from an approved credit counseling e 180 days before I filed this bankruptcy seived a certificate of completion.		agen	cy within the	ved a briefing from an approved credit counseling y within the 180 days before I filed this bankruptcy on, and I received a certificate of completion.	
V				he certificate and the payment plan, if any, and with the agency.			Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		
c	f you file anyway, the court can dismiss your case, you v ose whatever filing fee you	rill	I received a briefi agency within the	ing from an approved credit counseling e 180 days before I filed this bankruptcy not have a certificate of completion.		agen	cy within the	ng from an approved credit counseling 180 days before I filed this bankruptcy not have a certificate of completion.	
p	paid, and your creditors can begin collection activities			ter you file this bankruptcy petition, you of the certificate and payment plan, if any.				er you file this bankruptcy petition, you of the certificate and payment plan, if any.	
a	again.		approved agency during the 7 days	ted for credit counseling services from an		appro durin circu	oved agency ng the 7 days	ed for credit counseling services from an , but was unable to obtain those services after I made my request, and exigent erit a 30-day temporary waiver of the	
			attach a separate obtain the briefing	ay temporary waiver of the requirement, sheet explaining what efforts you made to g, why you were unable to obtain it before ruptcy, and what exigent circumstances e this case.	1	attac obtai you f	h a separate n the briefing	by temporary waiver of the requirement, sheet explaining what efforts you made to a why you were unable to obtain it before ruptcy, and what exigent circumstances e this case.	
			•	e dismissed if the court is dissatisfied with not receiving a briefing before you filed for		your		e dismissed if the court is dissatisfied with not receiving a briefing before you filed for	
			If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.  You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		าน	If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.  You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If yo do not do so, your case may be dismissed.			
				f the 30-day deadline is granted only for ited to a maximum of 15 days.				the 30-day deadline is granted only for ted to a maximum of 15 days.	
			I am not required counseling becar	I to receive a briefing about credit use of:			not required	to receive a briefing about credit use of:	
				I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
			Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.			Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
			☐ Active duty	. I am currently on active military duty in a military combat zone.			Active duty.	I am currently on active military duty in a military combat zone.	
			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waive credit counseling with the court.			
•		<b>BOOM ON SECURE W</b> OOD FOR PERSONS FOR			and the second seco	***********	and the support control and control and a control of		

	Case number (if known)		Singleton Last Name	Name	E Middle	Colleen First Name	Debtor 1	De
				teportina P	tions for F	swer These Quest	Part 6: Ans	Pa
s	er debts are defined in 11 U.S.C. § 101(8) as ly, or household purpose."	sumer debts? Con arily for a personal	ots primarily cor	Are your de	2.20/20	nd of debts do you		
money	debts are debts that you incurred to obtain money of the business or investment.	ness debts? Busin r through the opera	ots primarily bus s or investment to line 16c. to line 17.	for a busine No. Go	16b.			
	debts or business debts.	e that are not cons	e of debts you ov	State the typ	16c.			
	t after any exempt property is excluded and be available to distribute to unsecured creditors?		ing under Chapte	Yes. I am fi	ny  d s are able	estimate that after an property is excluded ninistrative expenses at funds will be availa ribution to unsecured s?	Do you e exempt p and adm paid that	17
0,000	00 D 50,000-100,000 D More than 100,000	î .	1,000-5,000 5,001-10,00 10,001-25,0	1-49 50-99 100-199 200-999	<b>3</b>	any creditors do you e that you owe?		18
billion ) billion	### \$1,000,000,001-\$10 billion ####################################	\$1,000,001-\$° \$10,000,001-\$° \$50,000,001-\$° \$100,000,001	00,000	\$0-\$50,000 \$50,001-\$10 \$100,001-\$5 \$500,001-\$6	your 🖸 🖸	uch do you estimate y to be worth?		19
billion ) billion	### \$1,000,000,001-\$10 billion ####################################	\$1,000,001-\$; \$10,000,001-5; \$50,000,001-5; \$100,000,001	00,000	\$0-\$50,000 \$50,001-\$10 \$100,001-\$6 \$500,001-\$6	your 🛄 💆		liabilities	
title 11, United is document, I with a	the information provided is true and correct. if eligible, under Chapter 7, 11,12, or 13 of title 11 choose to proceed under Chapter 7. who is not an attorney to help me fill out this document of the context of the c	vare that I may produce each chapter, ragree to pay som 1 U.S.C. § 342(b). If title 11, United Stang property, or obt	hapter 7, I am averelief available und I did not pay of tice required by with the chapter of atement, conceatines up to \$250,000 btor 1	to file under of understand the presents me a and read the n n accordance aking a false se can result in	ave chosen es Code. I u attorney re e obtained a juest relief in derstand ma kruptcy case 3571.	If I ha State If no have I requ I und bank	For you	
on billion bil	sillion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion \$10,000,000,001-\$50 billion \$10,000,000,001-\$10 billion \$500,000,001-\$10 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion \$10,000,000,001-\$10 billion \$10,000,000,000,001-\$10 billion \$10,000,000,000,000,001-\$10 billion \$10,000,000,000,000,000,000,000,000,000,	\$10,000,001-5 \$50,000,001-5 \$100,000,001-5 \$10,000,001-5 \$10,000,001-5 \$100,000,001 \$100,000,001 er penalty of perjurare that I may produce each chapter, or agree to pay som 1 U.S.C. § 342(b). If title 11, United Stang property, or obt	million  0,000  0,000  00,000  million  and I declare unclease available unclease available unclease available unclease available unclease up to \$250,000  btor 1	\$50,001-\$10 \$100,001-\$5 \$500,001-\$10 \$500,001-\$10 \$100,001-\$5 \$500,001-\$10 d this petition, to file under of understand the presents me a and read the n in accordance aking a false se e can result in	your your your your your your your your	ich do you estimate yes to be?  In Below  I hav  If I ha  State  If no have I required I und bank	20. How much liabilities  Part 7: Sign	20 Pa

Debtor 1	Colleen	E	Singleton	Case number (if known)
	First Name	Middle Name	Last Name	The state of the s
represente	torney, if you are d by one not represented by an ou do not need to file this	proceed under each chapter for 11 U.S.C. § 34	Chapter 7, 11, 12, or 13 of or which the person is eligib 2(b) and, in a case in which	nis petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under le. I also certify that I have delivered to the debtor(s) the notice required by § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
page.		X Signature	of Attorney for Debtor	Date <u>04/27/2022</u> MM / DD / YYYY
		Roger G. Printed na	me	
		Cotner La Firm name		
		Number	Street	
		Grand Ha	aven	MI 49417-0838 State ZIP Code
		Contact pl	none <u>(616) 846-7153</u>	Email address <u>roger@cotnerlaw.us</u>
		P36569		MI
		Bar numbe	er	State

	Case:22	2-00864-jtg	Doc #:1	Filed: 04/27/2022	Page 9 of 40	
Fill in this infor	mation to identify your case a	and this filing:				
Debtor 1	Colleen First Name	E Middle Name	Singleton Last Name			
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	We:	stern District of	f Michigan	_	
Case number					ш	Check if this is an amended filing
Official F	orm 106A/B					
Schedu	le A/B: Proper	ty				12/15
1. Do you ov	cribe Each Residence, E vn or have any legal or equite to Part 2.					<u> </u>
<b>√</b> Yes. W	/here is the property?					
	<b>R Airline Drive</b> address, if available, or other dea	scription <b>1</b> Sin	s the property? gle-family home plex or multi-uni			ims or exemptions. Put the ims on Schedule D: Creditors i by Property.
City	kegon	Col  Mai  ZIP Code  Lar  Invo	ndominium or co nufactured or m nd estment propert neshare	poperative sobile home		Current value of the portion you own?  \$83.800.00  your ownership interest hancy by the entireties, or a
		Who h	as an interest i	n the property? Check one.	Fee Simple	
		☐ Del	btor 1 only btor 2 only btor 1 and Debt east one of the	or 2 only debtors and another	☐ Check if this is com (see instructions)	munity property
المساعلة المساء		proper	ty identification	wish to add about this item number: PP# 61-15-140-00	0-0007-00	
<ol><li>Add the d</li></ol>	ollar value of the portion you	i own for all of yo	our entries from	Part 1, including any entries	s tor pages	1

\$83,800.00

you have attached for Part 1. Write that number here.....

			Case:22-00864	-jtg Doc #:1	Filed: 04/27/2022	Page 10 of 40	
Deb	tor 1	Colleen	E Middle Name	Singleton Last Name		Case number (if known)	
		First Name	Middle Name	Last Name			
Pai	d 2: I	Describe Your Veh	icles				
	Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories    No						
Do	you ow	m, lease, or have lega	al or equitable interest	in any vehicles, whe	ther they are registered or no	ot? Include any vehicles	
you	own th	at someone else drive	es. If you lease a vehic	e, also report it on So	chedule G: Executory Contrac	ets and Unexpired Leases.	
3.			, sport utility vehicles,	motorcycles			
			Suzuki W	ho has an interest in	the property? Check one.	Do not deduct secured clain	ns.or.exemptions. Put the
	Mc	odel.	Grand Vitara			amount of any secured clair	ns on Schedule D: Creditors
			<del>-</del>	•	r 2 only	Current value of the	Current value of the
					•	• • •	•
	·	•		Check if this is com	munity property	\$3,607.00	\$3,607.00
		nei inionnation.			intuitity proporty		
4.	Water	rcraft, aircraft, motor	homes. ATVs and other	er recreational vehicl	es, other vehicles, and acces	ssories	
	Exam	ples: Boats, trailers, r					
	_						
5.	_		portion you own for a	Il of your entries from	n Part 2. including any entrie	es for pages	
<b>.</b>	you h	nave attached for Par	t 2. Write that number	nere			<b>→</b>
		\$3,607.00					
			*				and the second s
D o	2. I	Dosariba Yaur Bar	reanal and Hausah	ald Itame			
D	o you o	wn or have any legal	h <del>-</del>				portion you own?
		egizant.					The state of the s
6.	House	ehold goods and furn	ishings			minimizaradagigigadinishkiri ittiri ittiri	To any other hance interior statistic describeration (i.e., one for the control of the control o
	Examp	oles: Major appliance	es, furniture, linens, chi	na, kitchenware			
	7		Usual household item	s, no single item wort	h more than \$500		\$2 500 00
	16:	s. Describe					42,000.00
7.			radine: audin viden e	teren and digital equ	inment: computers printers s	ecannere: music	
	Examp					ocarmers, music	
	<b>-73</b>		See Attached.				\$300.00
	GE TE	s. Describe					j
8.			audiaca, palatinga print	a or other ortworks h	acks mistures or other art ob	io eta:	
	⊏xamp				ooks, pictures, or other art ob memorabilia, collectibles	geota,	
	☑ No						]
<b>∩</b> #=-		s. Describe m 106A/B		Çah	edule A/B: Property		page 2
CIII	Mai FUIT	II IQUAD		301	Cadio Arb. Floherty		hade F

Case:22-00864-jtg Doc #:1 Filed: 04/27/2022 Page 11 of 40 Debtor 1 Colleen Singleton Case number (if known). First Name Middle Name Last Name 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☑ No Yes. Describe...... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment M No Yes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories **Used Clothing** Yes. Describe...... \$300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, ☐ No Costume Jewelry \$100.00 Yes. Describe...... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No 3 dogs and 1 cat \$100.00 Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list **☑** No Yes. Describe...... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here \$3,300.00 Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the

portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples:	s: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you	file your petition
-----------	---	--------------------

☐ No

\$0.00

Singleton Debtor 1 Colleen Case number (if known) -Middle Name **Last Name** First Name 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No **☑** Yes..... Institution name: \$1,976.00 Fifth Third Bank 17.1. Checking account: 17.2. Checking account: Fifth Third Bank 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **☑** No ☐ Yes..... Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **☑** No Yes. Give specific information about them..... % of ownership: Name of entity:

Doc #:1 Filed: 04/27/2022 Page 12 of 40

Case:22-00864-jtg

Case:22-00864-jtg Doc #:1 Filed: 04/27/2022 Page 13 of 40 Debtor 1 Colleen Singleton Case number (if known) -Middle Name First Name **Last Name** 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **☑** No ☐ Yes. Give specific information about them..... issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **☑** No ☐ Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **☑** No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit:

Prepaid rent:

Telephone:

Case:22-00864-jtg Doc #:1 Filed: 04/27/2022 Page 14 of 40 Singleton Debtor 1 Colleen Case number (if known) Middle Name Last Name First Name Water: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ☐ Yes..... Issuer name and description: Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). M No ☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **√** No ☐ Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **√** No Yes. Give specific information about them.... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses M No Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions.

				er a a a a a a a a a a a a a a a a a a a
28.	Tax refunds owed to you			
	□ No			
	Yes. Give specific information about	2021   2021 Tax Return will be filed in May	Federal:	unknown
	them, including whether you already filed the returns and		State:	unknown
	the tax years		Local:	
			Local.	<del></del>
29	Family support			
23.		y, spousal support, child support, maintenance, divorce se	ettlement, property settleme	nt
		. , , , , , , , , , , , , , , , , , , ,		•
	✓ No ☐ Yes. Give specific information			
	Tes. Give specific information		Alimony:	<del></del>
			Maintenance:	
			Support:	
			Divorce settlement:	
			Property settlement:	
30.	Other amounts someone owes you			
	Examples: Unpaid wages, disability insur	ance payments, disability benefits, sick pay, vacation pay	, workers' compensation,	
	Social Security benefits; unpa	id loans you made to someone else		
	Yes. Give specific information			
31	Interests in insurance policies			
•		nce; health savings account (HSA); credit, homeowner's, o	or renter's insurance	
	<b>☑</b> No			
	☐ Yes. Name the insurance company	Company name: Ben	eficiary:	Surrender or refund value:
	of each policy and list its value			Carrendor of Folding Value.
32.	Any interest in property that is due you for	rom someone who has died		
	If you are the beneficiary of a living trust, e	expect proceeds from a life insurance policy, or are curren	tly entitled to receive	
	property because someone has died.			
	✓ No ☐ Yes. Give specific information			
	— res. Give specific information			
32	Claims against thirdtib-ti	and you have filed a favorable covered a selection of f	4	
<b>33</b> .	Examples: Accidents, employment disput	not you have filed a lawsuit or made a demand for paym	ent	
	No			
	Yes. Describe each claim	Colleen Singleton v Richard Clark		£4.00
				\$1.00

Singleton Colleen Debtor 1 Case number (if known) Middle Name Last Name First Name Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **☑** No Yes. Describe each claim..... 35. Any financial assets you did not already list ☐ Yes. Give specific information....... Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,983.05 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned M No Yes. Describe...... Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices **☑** No Yes. Describe...... 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade **√** No Yes. Describe...... 41. Inventory **☑** No Yes. Describe...... 42. Interests in partnerships or joint ventures **☑** No Yes. Describe...... % of ownership: Name of entity:

Doc #:1 Filed: 04/27/2022

Page 16 of 40

Case:22-00864-jtg

Case:22-00864-jtg Doc #:1 Filed: 04/27/2022 Page 17 of 40 Debtor 1 Colleen Singleton Case number (if known) -First Name Middle Name Last Name 43. Customer lists, mailing lists, or other compilations Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44. Any business-related property you did not already list **√** No ☐ Yes. Give specific information..... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here...... \$0.00 Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ✓ No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish **√** No ☐ Yes..... 48. Crops-either growing or harvested **√** No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **√** No 50. Farm and fishing supplies, chemicals, and feed **√** No ☐ Yes.....

Case:22-00864-jtg Doc #:1 Filed: 04/27/2022 Page 18 of 40 Singleton Debtor 1 Colleen Case number (if known) Middle Name **Last Name** First Name 51. Any farm- and commercial fishing-related property you did not already list **☑** No Yes. Give specific information..... Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00 for Part 6. Write that number here...... Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership \$1,000.00 Estimated SS Disability per month Yes. Give specific information..... Add the dollar value of all of your entries from Part 7. Write that number here...... \$1,000.00 Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2. \$83,800.00 Part 2: Total vehicles, line 5 \$3,607.00 56. Part 3: Total personal and household items, line 15 \$3,300.00 Part 4: Total financial assets, line 36 \$1,983.05 58. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 60. Part 7: Total other property not listed, line 54 \$1,000.00 \$9,890.05 \$9,890.05 Copy personal property total→ Total personal property. Add lines 56 through 61..... 62. \$93,690.05 Total of all property on Schedule A/B. Add line 55 + line 62.....

Debtor 1 Colleen E Singleton Case number (if known) \_\_\_\_\_\_

#### **SCHEDULE A/B: PROPERTY**

**Continuation Page** 

7.	Electronics	
	TV's (2)	\$200.00
	Cellphone	\$100.00

Official Form 106A/B

		Ousc.2	2 0000+ jtg	, Doc	1 110	.u. 04/21/	2022 1 0	.gc 20	01 40		
Fill	in this information t	o identify your case:									
De	ebtor 1	Colleen First Name	E Middle Name	Singleton Last Name	110						
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name		17117					
Ur	nited States Bankru	ptcy Court for the:	W	estern District of M	lichig	ıan					
	ase number _ known)									Check if this is an amended filing	
Off	ficial Form	106C									
Sc	hedule C	: The Prop	perty Yo	u Claim a	ıs	Exemp	t			Market State of the State of th	04/22
prop	erty you listed on and attach to this p	curate as possible. I Schedule A/B: Prope age as many copies	erty (Official For	m 106A/B) as your	soul	ce, list the pr	operty that you	ı claim as	exempt	. If more space is no	eded, fill
amo Som How	unt as exempt. Alte ne exemptions—su rever, if you claim a	rty you claim as exe ernatively, you may ch as those for heal n exemption of 100° to exceed that amo	claim the full fair th aids, rights to % of fair market	r market value of th o receive certain b value under a law t	ne pr enefi that I	operty being its, and tax-ex imits the exer	exempted up to cempt retireme nption to a par	the amo nt funds- ticular do	unt of ar —may be	ny applicable statuto e unlimited in dollar	ory limit.
Pa	rt 1: Identify th	e Property You C	laim as Exem	ıpt							
1.		mptions are you claing state and federal					ith you.				
	☑ You are claim	ing federal exemption	ns. 11 U.S.C. § 5	522(b)(2)							
2.	For any property	you list on <i>Schedul</i>	e A/B that you c	laim as exempt, fill	in th	ne information	n below.				
	ef description of th hedule A/B that list	e property and line s this property		ent value of the on you own	Am	ount of the ex	xemption you o	laim	Specif	ic laws that allow ex	emption
				the value from edule A/B	Che	eck only one L	oox for each exe	emption.			
	ef description:			\$83.800.00	Ą	\$	8,114.57		11 U.S.	C. § 522(d)(1)	
Lin	e from hedule A/B: 1.			\$63,600.00			market value, u able statutory li	•			
Bri	ef description:			00.007.00	<b>∆</b>	\$	3,607.00		11 U.S.	C. § 522(d)(2)	
Lin	006 Suzuki Grand V ne from hedule A/B:3.			\$3,607.00		100% of fair to any applic	market value, u able statutory li	p mit			
3.		a homestead exem			iled (	on or after the	date of adjustm	nent.)			

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No☐ Yes

Debtor 1	Colleen	E	Singleton	Case number (if known)
	First Name	Middle Name	Last Name	. , , , , , , , , , , , , , , , , , , ,
Part 2: Add	litional Page			

		2014 - T. 15 <b>20</b> 0 (2014) (2014) (2014) (2014)	Dennistry & Commission (1) The property of the commission of the c
Brief description of the property and line on Schedule A/B that lists this property.	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: Usual household items, no single item worth m	er transi i fili sir i me emir træds virks frikkt sakkelikkinik milit milit i milit fili milit sam skeve ti und 30.	\$700.00	11 U.S.C. § 522(d)(3)
than \$500	#2,000.00	100% of fair market value, up	
Line from Schedule A/B: 6		to any applicable statutory limit	
			11 U.S.C. § 522(d)(5)
		100% of fair market value, up to any applicable statutory limit	
Brief description:		<b>☑</b> \$200.00	11 U.S.C. § 522(d)(3)
TV's (2)	\$200.00	100% of fair market value, up	
Line from Schedule A/B: 7		to any applicable statutory limit	
Brief description:		<b>☑</b> \$100.00	11 11 C C & E22(4)(2)
Cellphone	\$100.00	100% of fair market value, up	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 7		to any applicable statutory limit	
Brief description:		<b>☑</b> \$300.00	The second secon
Used Clothing	\$300.00	\$300.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:11		to any applicable statutory limit	
Brief description:		<b>☑</b> \$100.00	44.11.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.
Costume Jewelry	\$100.00	\$100.00 100% of fair market value, up	11 U.S.C. § 522(d)(4)
Line from Schedule A/B: 12		to any applicable statutory limit	
Brief description:	**************************************	<b>☑</b> \$100.00	44 11 0 0 0 0 000/41/61
3 dogs and 1 cat	\$100.00	\$100.00 100% of fair market value, up	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 13		to any applicable statutory limit	
Brief description:		<b>☑</b> \$0.00	44 II C C S E22/4\/E\
Cash	\$0.00	100% of fair market value, up	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 16		to any applicable statutory limit	
Brief description:		<b>√</b> \$1,976.00	11 U.S.C. § 522(d)(5)
Fifth Third Bank Checking account	\$1,976.00	100% of fair market value, up	11 0.3.0. 9 322(0)(3)
Line from	<del></del>	to any applicable statutory limit	
Schedule A/B:17			

Debtor 1	First Name	Middle Name	Last Name		Case number	er (ir known)
Part 2: Addi		Wilddie Hame	East Name			SUPP MACORINE PROFES
	on of the property an		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Brief descriptio			\$6.05	Ą	\$6.05	11 U.S.C. § 522(d)(5)
Savings account					100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B:	17					1 1 16 47
Brief descriptio	n: eton v Richard Clark		\$1.00	Ą	\$1.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:				u	100% of fair market value, up to any applicable statutory limit	and the second of the
Brief description			\$1,000.00	Ą	\$1,000.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	Disability per month 53		\$1,000.00		100% of fair market value, up to any applicable statutory limit	.e. awar nag

		Ousc.27	_ 0000+ jtg	D00 11.1 1 11cd. 04/21/20	722 Tage 20	01 40	
Fill	in this information	to identify your case					
De	ebtor 1	Colleen	Е	Singleton			
De	SDIOI 1	First Name	Middle Name	Last Name			
De	ebtor 2						
	pouse, if filing)	First Name	Middle Name	Last Name	7 KF A		
Un	nited States Bankru	iptcy Court for the:	W	estern District of Michigan			
	ase number known)			is ling no		Check if amended	this is an d filing
Off	ficial Form	106D					
Sc	hedule D	: Creditor	s Who H	ave Claims Secure	ed by Prope	ertv	12/15
spac case 1. Do	te is needed, copy number (if known any creditors hav No. Check this bo	the Additional Page 1). We claims secured box and submit this for	e, fill it out, number y your property? rm to the court wi	ople are filing together, both are equaler the entries, and attach it to this form the control of the control o	n. On the top of any a	dditional pages, wri	
V	Yes. Fill in all of th	he information below	·.				
Par	t 1: List All Se	cured Claims					
2.	separately for each	ch claim. If more than	one creditor has	secured claim, list the creditor a particular claim, list the other in alphabetical order according to the	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Shellpoint Mortga	age Servicing	Describe t	he property that secures the claim:	\$75,685.43	\$83,800.00	\$0.00
	Creditor's Name Jack Navarro, President and CE	=0	4522 Airli	ne Drive Muskegon, MI 49444			
	55 Beattie Place			ate you file, the claim is: Check all that	:		
	Number Stree		— apply. ☐ Conting	ent			
	Greenville, SC 29 City	State ZIP Code					
	Who owes the de	bt? Check one.	Dispute				
	Debtor 1 only		Nature of I	ien. Check all that apply.			
	☐ Debtor 2 only ☐ Debtor 1 and □	Debtor 2 only	✓ An agre	ement you made (such as mortgage red car loan)			
	At least one of	1.51		ry lien (such as tax lien, mechanic's			
	☐ Check if this c	laim relates to a		ent lien from a lawsuit			
	community de	ebt		ncluding a right to offset)			
	Date debt was inc 08/20/2004	curred	Last 4 digi	ts of account number 6 1 2 1			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$75,685.43

Debtor 1	Colleen First Name	E Middle Name	Singleton e Name Last Name			Case number (if known)			
Part 1: A	dditional Page fter listing any entric .3, followed by 2.4, a		e, number them beginning w	An th Do val	lumn A nount of claim not deduct the ue of lateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion (fany		
2.2Creditor's N	lame	Describ	e the property that secures the cla	im:					
Number	Street		e date you file, the claim is: Check all	that					
City Who owes	State ZIP Cost the debt? Check one.	Cont	tingent quidated						
☐ Debtor	•	Disp	uted						
	1 and Debtor 2 only	☐ An a	of lien. Check all that apply. greement you made (such as mort ecured car loan)	gage					
Check	if this claim relates to a unity debt	lien)		ic's					
Date debt	was incurred		gment lien from a lawsuit er (including a right to offset)						
		Last 4 c	digits of account number						
Add the	dollar value of your entri	es in Column A o	n this page. Write that number he	·e:		00.00			
If this is 1	the last page of your form	n, add the dollar y	value totals from all pages. Write t	hat number	\$75.60	35 43			

here:

Debtor 1	Colleen	E Singleton		gleton	Case number (if known)			
	First Name	Middle Name	Las	t Name				
	-							
Part 2:	List Others to Be No	tified for a Debt Ti	hat You	Already List	ed			
trying to than one	collect from you for a del	ot you owe to someon to that you listed in	re else, li	st the creditor in	debt that you already listed in Part 1. For example, if a collection agency is n Part 1, and then list the collection agency here. Similarly, if you have more creditors here. If you do not have additional persons to be notified for any			
□1 <u>Le</u>	gacy Mortgage Asset Trus	2019-GS7			On which line in Part 1 did you enter the creditor?1_			
Nan					Last 4 digits of account number			
	0 E Liberty Dr 400 nber Street				<del>-</del>			
					_			
	heaton, IL 60187							
City	•	S	itate	ZIP Code				
2 <sub>_Ne</sub>	ewrez LLC		in a constant of the second of	tina maramitra a digitim na artina da pila da artina da pila da artina da periodo de destruiro de destruiro de	On which line in Part 1 did you enter the creditor?1_			
Nan					Last 4 digits of account number			
	550 Falling Water Rd				<del>_</del> .			
<u>c/o</u>	Augusta Chauhan, Mortg	age Consultant			_			
Str	rongsville. OH 44136							
City		S	itate	ZIP Code				
3 <sub>_Sc</sub>	hneiderman & Sherman P.	C		for here of the control scatter of a section state and account sections section and the section of	On which line in Part 1 did you enter the creditor? 1			
Nan					Last 4 digits of account number			
	938 Research Drive 300 nber Street				<del>-</del>			
		·			_			
Fa	rmington, MI 48335							
City		S	itate	ZIP Code	<b>-</b>			

	Ou30.2	.2 0000+ jt	g Doc //.1 1 lica. 04/21/20	122 1 age 20 01 40			
Fill in this information t	o identify your case:						
Debtor 1	Colleen	E	Singleton				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankru	ptcy Court for the:		estern District of Michigan	_			
Case number _ (if known)					Check if this is an amended filing		
Official Form	106E/F						
Schedule E	/F: Credite	ors Who	<b>Have Unsecured Cl</b>	aims	12/15		
106A/B) and on Schedule I the boxes on the left. A  Part 1: List All of  1. Do any creditors  No. Go to Pal  Yes.  2. List all of your proclaim listed, identify amounts. As mucfill out the Continuance.	ule G: Executory Co D: Creditors Who Ho Attach the Continuat Your PRIORITY Unsec that I was priority unsec that I was provided that ify what type of claim that possible, list the Jation Page of Part 1	ntracts and Une old Claims Secu- ion Page to this Insecured Cla- ured claims aga tims. If a creditor in it is. If a claim he claims in alphal. If more than or		not include any creditors with I, copy the Part you need, fill it is, write your name and case not name, list the creditor separately list that claim here and show burne. If you have more than two other creditors in Part 3. klet.)	partially secured claims that tout, number the entries in umber (if known).  for each claim. For each oth priority and nonpriority priority unsecured claims,		
				cialm ar	nount amount		
Priority Creditor's	Name	<del></del>	Last 4 digits of account number				
Filolity Creditor 9	Name		When was the debt incurred?				
Number S	treet		As of the date you file, the claim is: Capply.	heck all that			
City	State	ZIP Code	Contingent				
	he debt? Check one		<ul><li>Unliquidated</li><li>□ Disputed</li></ul>				
Debtor 1 or	•		·				
Debtor 2 or	<del>-</del>		Type of PRIORITY unsecured claim:  Domestic support obligations				
	nd Debtor 2 only	anathar	Taxes and certain other debts you	owe the			
	e of the debtors and is claim is for a com		government				
		mainty acot	☐ Claims for death or person injury w	vhile you			
ls the claim sul ☐ No	njedi to onseti		were intoxicated Other. Specify				
☐ Yes			— Other, Specify				
	<b>— 100</b>						

Debtor 1	Colleen	E	Singleton	Case number (if known)
	First Name	Middle Name	Last Name	
Part 2: List	All of Your NONE	PRIORITY Unsecur	ed Claims	
3. Do any cre No. Yo Yes.  4. List all of y unsecured 1. If more t Continuation  4.1 HSBC C Nonpriority c/o Jam 1111 N T Number Las Veg City Who incu V Debt Debt Debt Chec Is the cla	rditors have nonprious have nothing to resour nonpriority unsclaim, list the credit han one creditor hold on Page of Part 2.  rard Services  r Creditor's Name  ie Winnett, Vice Provinces  Street  as, NV 89144  urred the debt? Cheor 1 only or 2 only or 1 and Debtor 2 or ast one of the debto	pority unsecured claims eport in this part. Submit secured claims in the a or separately for each of lds a particular claim, lie sesident  State ZIP Code eck one.  Inly rs and another r a community debt	against you?  It this form to the court with your other  Interpolation of the creditor with the creditor with the care of the creditor with the other creditors in Part 3. If you with the other creditors in Part 3. If you with the care of th	the holds each claim. If a creditor has more than one nonpriority what type of claim it is. Do not list claims already included in Part a have more than three nonpriority unsecured claims fill out the  Total claim  S427.43  Incurred? 2006  Pe, the claim is: Check all that apply.
Law Offf 30833 N Number Farming City Who incu Debt Debt Debt At lea	r Creditor's Name ice of Richard H. C orthwestern Hwy 2 Street iton, MI 48334  urred the debt? Che or 1 only or 2 only or 1 and Debtor 2 on ast one of the debto	State ZIP Code eck one.  Inly  rs and another r a community debt	Contingent Unliquidated Unsputed Type of NONPRIORIT Student loans Obligations arising divorce that you designed	ncurred? <u>07/13/2021</u> e, the claim is: Check all that apply.

ebtor 1	Colleen	Ε	Singleton	Case number (if known)
	First Name	Middle Name	Last Name	
art 3: List (	Others to Be N	otified About a Deb	t That You Aiready Li	sted
collection agency he	agency is trying to re. Similarly, if you	o collect from you for a I have more than one o	debt you owe to someor reditor for any of the deb	for a debt that you already listed in Parts 1 or 2. For example, if a ne else, list the original creditor in Parts 1 or 2, then list the collection its that you listed in Parts 1 or 2, list the additional creditors here. If you o not fill out or submit this page.
LVNV F	unding LLC		On which entry ir	Part 1 or Part 2 did you list the original creditor?
c/o Resi	urgent Capital Se 1269	rvices	Line <u>4.1</u> of ( <i>Cl</i>	neck one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Number <b>Greenvi</b>	Street		Last 4 digits of a	count number
City		State ZIP C	ode	
Resurge	ent Cap Services	LP	On which entry is	Part 1 or Part 2 did you list the original creditor?
Name 55 Beatt	tie Pl 110		Line <u>4.1</u> of (C/	neck one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	ille, SC 29601			- Part 2. Oreditors with Northholity Offsecured Oranis
City		State ZIP C	Last 4 digits of a	count number
			On which entry is	Part 1 or Part 2 did you list the original creditor?
Name			line of (C	neck one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		0, (0,	Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of a	count number
City	<u> </u>	State ZIP C	ode	

Debtor 1 Colleen Case number (if known). Middle Name First Name **Last Name** Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. Total claim 6a. Domestic support obligations 6a. \$0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the 6b. \$0.00 government 6c. Claims for death or personal injury while you 6c. \$0.00 were intoxicated 6d. Other. Add all other priority unsecured claims. 6d. \$0.00 Write that amount here. 6e. Total. Add lines 6a through 6d. 6e. \$0.00 Total claim 6f. Student loans 6f. \$0.00 Total claims from Part 2 6g. Obligations arising out of a separation 6g. \$0.00 agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and 6h. \$0.00 other similar debts 6i. Other. Add all other nonpriority unsecured 6i. \$3,927.43 claims. Write that amount here. 6j. Total. Add lines 6f through 6i. 6j. \$3,927.43

		Case:2	22-00864-jtç	g Doc #:1 F	iled: 04/27/2022	Page 30 of 40	
Fill in this	information t	o identify your case	:				
Debtor 1		Colleen	E	Singleton			
Destor 1		First Name	Middle Name	Last Name			
Debtor 2 (Spouse,		First Name	Middle Name	Last Name			
United S	States Bankru	ptcy Court for the:	w	estern District of Mic	higan		
Case nu (if known)	_						Check if this is an amended filing
Officia	l Form	106G					
Sche	dule G	: Executo	ry Cont	racts and	<b>Unexpired Le</b>	eases	12/15
2. List se rent, v leases	es. Fill in all o eparately eac rehicle lease, i.	f the information bel	ow even if the co ny with whom yo e instructions for	ntracts or leases are ou have the contract this form in the instru	ules. You have nothing else listed on Schedule A/B: Pr or lease. Then state what action booklet for more exa	operty (Official Form 10) each contract or lease mples of executory cont	s for (for example,
Name	e 	····			_		
Numl	ber Stree	t			_		
City		State	ZIP Code				
2.2	encentralismente anticipato provinci del Selectivo del Contralismente	and the second s	nen en	a sila kulu a daga kan silasahan na menerina menang silabah dikukala <del>nda daga kepanganga</del>	<u>- 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1999</u>		
Nam	е	<del></del>	•		<del>_</del>		
Numi	ber Stree	t			_		
City		State	ZIP Code		_		
2.3		ONE OF THE PROPERTY OF THE PRO		TO STATE THE STATE OF	THE CASE AND THE C		with a second to the second
Name			<del></del>				
Num		t			_		
<u></u>		State	7ID Code		<del></del>		

2.4

Name

Number

City

Street

State

ZIP Code

C.11.	W				
F111 (1	n this information	on to identify your ca	ase:		
Del	btor 1	Colleen First Name	E Adiddle None	Singleton	
<u>ا</u> ا		rirst Name	Middle Name	Last Name	
	btor 2 ouse, if filing)	First Name	Middle Name	Last Name	<del></del>
Uni	ited States Ban	kruptcy Court for the	e: <b>W</b>	estern District of Michigan	
	se number :nown)				Check if this is an amended filing
Off	icial Forn	n 106H	-		
Sc	hedule	H: Your C	odebtors		12/15
togeti in the	her, both are ed	qually responsible t	for supplying correc	t information. If more spac	as complete and accurate as possible. If two married people are filing ce is needed, copy the Additional Page, fill it out, and number the entries dditional Pages, write your name and case number (if known). Answer
1.	Do you have ☑ No	any codebtors? (If	you are filing a joint	case, do not list either spou	use as a codebtor.)
	☐ Yes				
2.		ana, Nevada, New N		ity property state or territor Texas, Washington, and Wi	ory? (Community property states and territories include Arizona, California, disconsin.)
	_		anavas erlandisav	ivalant liva with var at tha ti	ii
	□ les. blu y	our spouse, ronner	spouse, or legal equ	ivalent live with you at the ti	uner
		which community s	tate or territory did ye	ou live?	Fill in the name and current address of that person.
	Name				<del></del>
	Number	Street			
	City		State ZIP Cod		
3.	In Column 1, again as a co	debtor only if that	ebtors. Do not includ person is a guaranto	de your spouse as a codeb or or cosigner. Make sure y	otor if your spouse is filing with you. List the person shown in line 2 you have listed the creditor on Schedule D (Official Form 106D), Schedule D, Schedule E/F, or Schedule G to fill out Column 2.
	Column 1: You				Column 2: The creditor to whom you owe the debt  Check all schedules that apply:
3.1	seeremannemannemanii (1941) (1941) (1941) (1941) (1941) (1941) (1941) (1941) (1941) (1941) (1941) (1941) (1941)	errine value victory (value victory)	accommunicación de la destacación de la travella de la companya de la companya de la companya de la companya d	oo maar caaannaannii in taraa ah ah in gaala ah	Schedule D, line
$\mathbf{L}$	Name	-			Schedule E/F, line
	Number Stre	et et	<u>-</u>		Schedule G, line

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

City

State

ZIP Code

Fill	in this information to identify yo	our case:					
D	ebtor 1 Colleen		Singleton				
	First Name	Middle Name L	ast Name				
15,735	ebtor 2 pouse, if filing) First Name	Middle Name L	ast Name		<del></del>	Check if this is:	
U	nited States Bankruptcy Court fo	or the: Wester	n District of Mich	igan		☐ An amended filing	
	ase number					A supplement showing p chapter 13 income as of	
10000	known)	-				chapter 13 income as or	the following date.
				2 22		MM / DD / YYYY	
Of	ficial Form 106I						
S	chedule I: Your	Income					12/15
spo add	rmation. If you are married and use is not filing with you, do no itional pages, write your name  It 1: Describe Employme	ot include information about y and case number (if known).	our spouse. If me	ore sp	ace is needed, attach a	out your spouse. If you are se separate sheet to this form. O	parated and your n the top of any
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-filing	spouse
	If you have more than one job attach a separate page with information about additional	Employment status Occupation	Employed	ΔÍΝ	ot Employed	☐ Employed ☐ Not Empl	oyed
	employers.		( <del></del>				
	Include part time, seasonal, or	Employer's name				_	
	self-employed work.	Employer's address				Number Chart	
	Occupation may include stude or homemaker, if it applies.	ent	Number Stree	et		Number Street	
							result I str. 2
				PIT.	2: 1 7: 0 1:	O'the Charles	7:- 0-4-
		Have long ampleyed the	City		State Zip Code	City State	Zip Code
		How long employed the	Her			**************************************	
Pa	art 2: Give Details About	Monthly Income					
	unless you are separated.	of the date you file this form.					
	If you or your non-filing spous more space, attach a separate	e have more than one employed sheet to this form.	er, combine the in	forma	tion for all employers for	that person on the lines below.	If you need
					For Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sa deductions.) If not paid month	alary, and commissions (before ly, calculate what the monthly	re all payroll wage would be.	2.	\$0.00	\$0.00	
3.	Estimate and list monthly ov	ertime pay.		3.	+\$0.00	+ \$0.00	
4.	Calculate gross income. Add	line 2 + line 3.		4.	\$0.00	\$0.00	

			For Debtor 1	For Debtor 2 or non-filling spouse	
	Copy line 4 here→	4.	\$0.00	\$0.00	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$0.00	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00		
	5h. Other deductions. Specify:	5h.	+ \$0.00	<u>\$0.00</u> + \$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.		-	
	•		\$0.00	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross				
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$600.00	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	OD.	φο.σο	φυ.υυ	
	Include alimony, spousal support, child support, maintenance, divorce	0.		**	
	settlement, and property settlement.	8c.	\$1.655.00	\$0.00	
	8d. Unemployment compensation	8d.	<u>\$0.00</u>	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive				
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify:	8h.	+ \$0.00	+\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$2,255.00	\$0.00	
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$2,255.00	\$0.00	\$2,255.00
11.	State all other regular contributions to the expenses that you list in Sched	lule J.			
	Include contributions from an unmarried partner, members of your household friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that a				
	Specify:				\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistica			come. Write that	\$2,255.00
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this fo	m?			
	□ No.  Debtor has applied for Social Security benefits.				

Debtor 1	Colleen	lleen E Singleton		Case number (if known)	
	First Name	Middle Name	Last Name		er til halling kommen med hæmmer i kanne med hæmmer til sæmer.
8a. Attac	ched Statement				
			Business Inco	ome	
FINANC	IAL REVIEW OF THE D	DEBTOR'S BUSINESS	(NOTE: ONLY INCLUDE infor	mation directly related to the business operation.)	
PART A	- ESTIMATED AVERAG	SE FUTURE GROSS M	ONTHLY INCOME:		
1.	Gross Monthly Income	:			\$600.00
PART B	- ESTIMATED AVERAG	SE FUTURE MONTHLY	EXPENSES:		
2.	Payments to be Made Business Debts	Directly by Debtor to Se	ecured Creditors for Pre-Petition	חכ	
	TOTAL PAYMENTS TO	SECURED CREDITO	RS	\$0.00	
3.	Other Expenses				
	TOTAL OTHER EXPE	NSES		\$0.00	
					\$0.00
4.		PENSES(Add item 2 - 2			
PART C	- ESTIMATED AVERAG	BE NET MONTHLY INC	OME:		
5.	AVERAGE NET MONT	THLY INCOME(Subtrac	t item 22 from item 1)		\$600.00

Fill	in this information	to identify your cas	a:		100000000000000000000000000000000000000		
WE ST							
De	ebtor 1	Colleen First Name	E Middle Name	Singleton Last Name	Cho	ck if this is:	
<sub>D</sub> ,	ebtor 2	, not realise	madic Hame	Last Hame		An amended filing	
100	pouse, if filing)	First Name	Middle Name	Last Name		Supplement show	wing postnetition
Ur	nited States Bankr	uptcy Court for the:	w	estern District o			as of the following date:
Ca	ase number					MM / DD / YYYY	<u> </u>
	known)					WIWI / DD / TTTT	
Of	ficial Form	106.1					
		l: Your Ex	noncoc				1 100 00 00 000 100
							12/15
spac	s complete and a ce is needed, attac	ccurate as possible th another sheet to	this form. On the	eople are filing t top of any addit	ogether, both are equally respor ional pages, write your name an	isible for supplyir d case number (if	ng correct information. If more f known). Answer every question.
Pai	rt 1: Describe	Your Household					
1.	Is this a joint cas	e?	THE RESERVE TO A STREET OF THE STREET,				
	☑ No. Go to line	2.					
	Yes. Does De	otor 2 live in a sepa	rate household?				
	□No						
	⊔ Yes.	Debtor 2 must file (	Official Form 106J-	2, Expenses for	Separate Household of Debtor 2		
2.			<b>☑</b> No		5	2	The starting of
	Do not list Debtor 1 and Debtor 2.  Do not state the dependents'		Yes. Fill out this information for each dependent		Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	s Does dependent live with you?
							— □ No. □ Yes.
	names.						
							— No. ☐ Yes.
						_	— No. ☐ Yes.
							— No. ☐ Yes.
						_	
3.	Do your expense	es include	✓No				
	expenses of peo yourself and you	ple other than	Yes				
	,, ,						
Pa	rt 2: Estimate	Your Ongoing M	lonthly Expense	es			
Est	imate your expen	ses as of your ban	kruptcy filing date	unless you are	using this form as a supplemen	t in a Chapter 13	case to report expenses as of a
dat	e after the bankru	ptcy is filed. If this	is a supplemental	Schedule J, ch	eck the box at the top of the form	n and fill in the ap	oplicable date.
Inc	lude expenses pa ch assistance and	id for with non-cas have included it or	h government ass n Schedule I: Your	istance if you k	now the value of al Form 106I.)		Your expenses
4.			nses for your resi	dence. Include f	irst mortgage payments and any		7 185119
	for the ground or	lot.				4.	\$0.00
	If not included in	line 4:					
	4a. Real estate ta	ixes				4a.	\$0.00
	4b. Property, hom	neowner's, or renter	's insurance			4b.	\$100.00
	4c. Home mainte	nance, repair, and u	ıpkeep expenses			4c.	\$0.00
		association or cond				4d.	

Debtor 1 Colleen E Singleton Case number (if known) \_\_\_\_\_\_\_

	You	ır expenses
. Additional mortgage payments for your residence, such as home equity loans	5	\$0.00
. Utilities:		
6a. Electricity, heat, natural gas	6a. ——	\$130.00
6b. Water, sewer, garbage collection	6b	\$30.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$50.00
6d. Other. Specify:	6d	\$0.00
. Food and housekeeping supplies	7.	\$277.00
. Childcare and children's education costs	8	\$0.00
. Clothing, laundry, and dry cleaning	9	\$50.00
0. Personal care products and services	10.	\$0.00
1. Medical and dental expenses	11.	\$0.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12.	\$433.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
4. Charitable contributions and religious donations	14.	\$0.00
<ol> <li>Insurance.</li> <li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li> </ol>		
15a. Life insurance	15a. —	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$100.00
15d. Other insurance. Specify:	15d	\$0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.      Specify:	16	\$0.00
7. Installment or lease payments:		
• •	17a	\$0.00
17a. Car payments for Vehicle 1	17b	\$0.00
17b. Car payments for Vehicle 2	17c.	\$0.00
17c. Other. Specify:	 17d.	
17d. Other. Specify:		\$0.00
<ol> <li>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</li> </ol>	18	\$0.00
9. Other payments you make to support others who do not live with you.	10	ድስ ስስ
Specify:	19	\$0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom-	e.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Debtor 1		Colleen	Colleen E Singleton		Case number	(if known)
		First Name	Middle Name	Last Name	<del></del> -	
21.	Other. Spe	ecify:			21.	+\$0.00
22.	Calculate	your monthly exp	enses.			
	22a. Add li	ines 4 through 21.			<b>22a</b> .	\$1,170.00
	22b. Copy	line 22 (monthly e	expenses for Debtor 2),	<b>22b</b> .	<u>\$0.00</u>	
	22c. Add ti	ne 22a and 22b. T	The result is your month	ly expenses.	<b>22</b> c.	<u>\$1,170.00</u>
23.	Calculate	your monthly net	income.			A to the control of the control of comments of the control of the
	23а. Сору	line 12 (your com	bined monthly income)	from Schedule I.	<b>23a</b> .	\$2,255.00
	23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b.	<b>-</b> \$1,170.00
		act your monthly e	expenses from your mor	nthly income.	<b>23</b> c.	\$1,085.00
	11101	coult is your mont	my not moome.		200.	
24.	Do you ex	pect an increase	or decrease in your exp	penses within the year after you fi	le this form?	
				car loan within the year or do you of a modification to the terms of y		
	☑ No. ☐ Yes.	None				
		Landanian Company				

				_		
Fill in this information	to identify your case:					
Debtor 1	Colleen First Name	E Middle Name	Singleton Last Name			
Debtor 2	riist Name	Middle Name	Last Name	-		
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	uptcy Court for the:	Wes	stern District of Michigan			
Case number (if known)					ч	Check if this is an amended filing
Official Form	106Sum					
		sets and	Liabilities and	d Certain Sta	tistical	
Information		f to a manufacture	unia ana filiran ta matha a la atha	ana annalla naonanaible fo		12/15
	t; then complete the	nformation on the	ople are filing together, both is form. If you are filing ame			prect information. Fill out all all forms, you must fill out a
Part 1: Summariz	e Your Assets		BANKONIA TARAFALANIA AND AND AND AND AND AND AND AND AND AN			
						Your assets Value of what you own
1. Schedule A/B: Pro	anarty (Official Form	1064/R)				
						\$83,800.00
1b. Copy line 62, T	Total personal propert	y, from <i>Schedule</i> /	4/B			\$9,890.05
1c. Copy line 63, T	Total of all property on	Schedule A/B				\$93,690.05
Part 2: Summariz	ze Your Liabilities	í				
						Your liabilities Amount you owe
2. Schedule D: Credi	itors Who Have Claim	s Secured by Pro	perty (Official Form 106D)			
2a. Copy the total	you listed in Column	A, Amount of clair	m, at the bottom of the last pa	age of Part 1 of Schedule D	L	\$75,685.43
<ol> <li>Schedule E/F: Cre</li> <li>Copy the total</li> </ol>			fficial Form 106E/F) claims) from line 6e of <i>Sched</i>	ule E/F		\$0.00
3b. Copy the total	claims from Part 2 (n	onpriority unsecur	ed claims) from line 6j of Sch	edule E/F		<b>+</b> \$3,927.43
				Your	total liabilities	\$79,612.86
Part 3: Summariz	ze Your Income a	nd Expenses				
4. Schedule I: Your I	ncome (Official Form	106I)				550000-00000000 130-00
Copy your combin	ed monthly income fr	om line 12 of Sche	edule I			\$2,255.00
5. Schedule J: Your I	Expenses (Official Fo	rm 106J)				

\$1,170.00

Copy your monthly expenses from line 22c of Schedule J.

Debtor 1	Colleen	E	Singleton					
	First Name	Middle Name	Last Name					
Part 4: A	nswer These Ques	tions for Administr	ative and Statistical Rec	ords				
						·		
6. Are you f	iling for bankruptcy ur	nder Chapters 7, 11, or	13?					
=		• • •	orm. Check this box and submit	t this form to the court w	rith your other schedule	es.		
<b>☑</b> Yes								
_4	d of debt do you have?				_			
	<b>debts are primarily co</b> , or household purpose	<b>nsumer debts.</b> <i>Consur</i> e." 11 U.S.C. § 101(8). I	<i>ner debts</i> are those "incurred by Fill out lines 8-9g for statistical p	y an individual primarily purposes. 28 U.S.C. § 1	for a personal, 159.			
O Your	debts are not primarily	consumer debts. You	have nothing to report on this	part of the form. Check	this box and submit			
this fo	orm to the court with yo	ur other schedules.						
8. From the	Statement of Your Cur	rrent Monthly Income:	Copy your total current monthly	ly income from Official				
Form 122	A-1 Line 11; OR, Form	122B Line 11; OR, For	m 122C-1 Line 14.	,		\$1,615.50		
9. Copy the	following special cate	gories of claims from	Part 4, line 6 of Schedule E/F:					
				ground the supplies Social of the second				
:11111111111111111111111111111111111111		SKARASKI FANTSKA (ACTUALLEF KAFFRIER <del>SENSKE A</del> LFRANTSKA (ACTUALLEF		Total	cláim			
From F	art 4 on Schedule E/F	copy the following:						
U.S. TOP TOTAL ACTION	California (Liberteria Kalifornia)	nnantalare et van Gebruik 1980 in 1980 in 1984	edilania (C. 2000) (C. L. Landis (C. 2000) (C. 1000) (C. 2000) (C. 2000)	Milkon at 21 of Resident				
9a. Don	nestic support obligation	ns (Copy line 6a.)			\$0.00			
<del>-</del>								
9b. Taxe	es and certain other del	bts you owe the goverr	ment. (Copy line 6b.)		\$0.00			
9c Clair	ms for death or nerson:	al inium while you were	intoxicated. (Copy line 6c.)		\$0.00			
Jo. Glan	ma for death or persone	ar injury write you were	intoxicated. (Copy line oc.)		30.00			
9d. Stud	lent loans. (Copy line 6	if.)			\$0.00			
		•			**************************************			
		separation agreement	or divorce that you did not repo	ort as priority	\$0.00			
claim	ns. (Copy line 6g.)							
9f Deht	s to nension or profit-sl	haring plans, and other	similar debts. (Copy line 6h.)		<b>#0.00</b>			
J. DODE	o to policion of profit-si	namy pians, and other	Similar debts. (Copy line Oil.)	<b>*</b>	\$0.00			
9a Tata	il. Add lines 9a through	9f			\$0.00			
Jg. 10ta	, va unougn	<b></b>			\$0.00			

	Case:2	2-00864-jtg	Doc #:1	Filed: 04/27/2022	Page 40 of	40		
Fill in this information to	o identify your case:							
Debtor 1	Colleen	E	Singleton					
	First Name	Middle Name	Last Name	36.5				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankru	ptcy Court for the:	We	stern District of M	ichigan				
Case number (if known)							Check if this is an amended filing	
Official Form	106Dec							
Declaration	About an	Individu	ual Debto	r's Schedules	5			12/15
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				lying correct information.		4		
You must file this form or property by fraud in years, or both. 18 U.S.C	connection with a b C. §§ 152, 1341, 1519	ankruptcy case o	ules or amended s can result in fines (	schedules. Making a false s up to \$250,000, or imprison	tatement, conceal ment for up to 20	ing pr	operty, or obtaining	money
		vho is NOT an att	orney to help you	fill out bankruptcy forms?	te a and could be an			
<b>√</b> 1 No								
Yes. Name of per	rson			Attach Bankruptcy Petiti Signature (Official Form	ion Preparer's Noti 119).	ce, De	eclaration, and	
Under penalty of pe	rjury, I declare that	I have read the su	ummary and sched	dules filed with this declara	tion and that they	are tru	ue and correct.	
X Colleen E Single	eton, Debtor 1	Ston						

Date 04/27/2022 MM/ DD/ YYYY